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This ~~is~~ expected of nurses; and, moreover, nurses do it—nurses who are graduates of good schools and in good standing with their alumnae. To my knowledge, a nurse who had a case in an apartment hotel was told by her patient that she might go to the main dining-room or to the maid's dining-room just as she chose. She elected to go to the maid's dining-room, with the attendants, waitresses, firemen, and engineer.

I have had three reasons given me for this practice: one, that it can't be helped; two, that if a nurse does so, she can keep the case longer, as the expenses will be less for the patient; three, that if the nurse is unwilling to go to the maid's dining-room the patient will speedily get an attendant who does not object.

Sometimes (though I am thankful to say not often) it is the doctor's fault. I have known a fine city physician to advise the nurse to go to the maid's dining-room and to warn her that, if she were unwilling, he could get plenty of nurses who would do it.

Our leaders are nobly striving to raise the art of nursing to a professional basis, yet the majority of the community still regard it as upper class domestic service. That this is so is, I think, in an appreciable degree our own fault. I would like to know what others think on this subject.

SUSAN B. JOHNSON.

REGARDING SILVER CITY

DEAR EDITOR: Your letter of inquiry asking for definite addresses in Silver City to which inquiries as to the need of nurses could be sent has not been answered before, as I did not have the names of the Silver City physicians until now. You may refer to any of these: Dr. O. G. Westlake, Dr. F. P. Whitehill, Dr. G. K. Angle, Dr. N. McLake, Silver City, New Mexico, or Dr. S. S. Peters, Sunnyside Sanatorium, Dr. E. E. Bullock, New Mexico Cottage Sanatorium.

I am hoping some good nurse or nurses will go to this place, as I have heard some very pathetic stories of the difficulties the people have when they need nursing. The operative cases usually come to this hospital or go to Denver. We also have had several obstetrical cases come here because they could not get a nurse. Six hundred miles is a long way to have to travel when you are sick.

LAURA A. BEECROFT.

Minnequa Hospital, Pueblo, Col.

"HOW TO BECOME A TRAINED NURSE"

DEAR EDITOR: Will you kindly allow me to add a word in support of Miss Pindell's statement in the January JOURNAL in regard to the value to the nursing profession of the book entitled "How to Become a Trained Nurse." I have found the publication in question of the greatest use to me in my work of selecting nurses for examination for the naval service. Reference to it frequently furnishes me with information which would otherwise require much tedious correspondence to obtain and I regret to hear that the publisher is experiencing such difficulty in securing the necessary data for the revised edition of the book.

It may not be amiss to mention another instance that has recently come to my knowledge in regard to the difficulty of obtaining information of this character. Over a year ago I went in person to the United States Bureau of Education in Washington to request a copy of the report of the Commissioner of Education

upon the "Nurse Training Schools" of the country. The last report was published in 1906 and the next one was due in 1909. The head of the Bureau told me that this later one (then being compiled) would not contain the usual chapter on nurse training schools for the reason that the Bureau had experienced such difficulty in time past in obtaining the necessary information from hospitals and schools that it had decided to omit statistics of this nature from future reports.

This appears to me to be particularly unfortunate, occurring as it does at the very time when we are so earnestly striving to place the training of nurses upon a purely educational basis, and it is for this reason that I am bringing it to the attention of the profession.

Very respectfully,

ESTHER V. HASSON,
Superintendent Nurse Corps, United States Navy.

DIFFERENCE IN NURSING METHODS IN DIFFERENT LOCALITIES

DEAR EDITOR: As nursing is now considered a science and is taught universally, one would think its practice would be similar in different localities, but this is not so. While the object is in all places the same, the methods of obtaining the end vary greatly.

To one who has been accustomed to the effective system of the large New England hospitals, those of the west present a striking contrast. This might be explained by the fact that our eastern institutions are better established, while those of the west have attained their prominence within the last few years and through physicians who have gained their position in the medical profession by their characteristic ambition and ability.

Generally speaking, the hospitals of the west have exceptionally fine buildings, with good location, sanitation, etc. Money seems not to have been an object in fitting operating rooms, sterilizing appliances, and the many other departments without which the modern hospital is considered incomplete. This apparent extravagance often seems appalling. The nature of the work done is quite similar and the results equally good; but this is accomplished with much less labor and confusion in the east.

As a rule, the physicians of the west are more progressive and scientific, which is to be admired, yet extremes are never good. For instance: preparations discussed or read of one day are put in practice the following. This, of course, does not tend to a very smooth system in an operating room where assistants and nurses are at the disadvantage of not knowing just what may be required on this special occasion. Their progress seems too rapid to develop that system so necessary to any hospital.

Work which in many places is performed by two or three nurses, would in a case like the above require six or eight, while an operating room appears to be the nucleus of all the unemployed in the hospital. The fact that the more assistants and nurses who come in contact with the operation increase the liability of infection seems not to have been taken into consideration. Much help is also required to prepare different instruments and appliances, the necessity of which was not apparent at the offstart.

In fact, the hustle and bustle, so characteristic of the west, appear to have penetrated even the hospitals, the prevalent idea being that no patient can be